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PATENT 01P11666US01

Scr. No. 10/005.137

#### REMARKS

Claims 1, 7, 9, 15, 17, 23 and 26 have been amended to correct formality errors and to more clearly define the invention.

Support for the amendments is found in the Application on page 4 lines 19-28 in the existing claims and in the Application description in connection with Figure 2 and elsewhere.

### I. Objection to Claims

Claim 26 is objected as being a duplicate of claim 24.

Dependent claim 26 is amended to recite a different limitation than claim 24. Consequently this ground of objection is no longer deemed to apply and its withdrawal is respectfully requested.

II. Rejection under 35 U.S.C. 102(b)

Claims 1-27 are rejected under 35 U.S.C. 102(b) as being anticipated by US Patent 4,491,725 Pritchard. These claims, as amended, are deemed to be patentable for the reasons given below.

Amended claim I recites a method "for determining payment for provision of multiple different services based on predetermined reimbursement rules" comprising "receiving a record identifying a service provided to a specific entity; automatically grouping an item identifying said provided service together with an item identifying another service provided to said specific entity based on predetermined service record allocation rules; automatically creating a reimbursement record identifying grouped items; and calculating a reimbursement amount for said identified provided service and said other service provided to said specific entity based on a reimbursement contract". These features are not shown (or suggested) in Pritchard.

The system of Figure 1 automatically and correctly groups "records of services provided to a specific patient" and provides "a consolidated reimbursement claim to a payer. Application 10 correctly groups (41) records of lab test 17, X-ray 19 and hospital stay 21 provided to a specific patient on separate occasions. The records

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are grouped in a consolidated reimbursement record 15 as a composite charge unit. The correctly grouped records in reimbursement record 15 are used by application 10 to generate (42) a healthcare insurance claim for payment 25 based on predetermined contract reimbursement rules of Healthcare Ins. Co. 30" (Application page 5 lines 14-21, page 7 lines 27-29). The "disclosed system eliminates the need for manual intervention to move services from one record to another in order to satisfy a financial requirement to group services that are reimbursed together. This facilitates the system ability to calculate a correct expected reimbursement for services performed for a specific entity. The system automates the grouping of services into a reimbursement record based on rules" (Application page 4 lines 19-23). This capability is of substantial advantage in hospital administration and improves hospital operation.

The system of claim 1 receives a "record identifying a service provided to a specific entity" and involves "automatically grouping an item identifying said provided service together with an item identifying another service provided to said specific entity based on predetermined service record allocation rules". These features are nowhere shown or suggested in Pritchard. The Pritchard system does not involve "automatically grouping an item identifying said provided service together with an item identifying another service provided to said specific entity". The Pritchard system does NOT involve grouping items identifying provided services at all. The Pritchard reference describes a highly manual system enabling a patient to determine upon manual data entry a financial sum that will be reimbursed for a particular service. In the Pritchard system, in response to manual data entry via terminal 20, an electronic card MEDICARD 18 is read by the system to obtain healthcare insurance information and information about the patient and to validate the insurance is current (column 7 lines 20-24). Information "identifying" a "provided service" "MUST be manually entered" (column 7 lines 46-51, "The remaining information, which must be manually entered through any of the input devices 60-66 shown in FIG. 4 by the service provider 16, is concerned with the specifics of the diagnosis and treatment provided by the service provider 16 to the patient 14").

Consequently, Pritchard teaches mandatory manual entry of data identifying services provided to a patient and nowhere contemplates, discusses, mentions or suggests "automatically grouping an item identifying said provided service together with an item identifying another service provided to said specific entity". There is no description in Pritchard of any way services may be grouped. Even if it is alleged that such grouping could be achieved by entry of data via "input devices 60-66" (column 7 lines 46-48) identifying multiple services for common

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reimbursement by a healthcare contract, this is a manual grouping and NOT automatic grouping. Pritchard in column 8 lines 44-47 indicates that the system may provide a reimbursement amount for a "collection of services", however there is no indication in Pritchard that this is anything other than a list of discrete payments for a corresponding list of provided services entered via "input devices 60-66" (column 7 lines 46-48) as a manual activity. There is no suggestion or 35 USC 112 compliant enabling description of "automatically grouping an item identifying said provided service together with an item identifying another service provided to said specific entity" in Pritchard. In contrast, the Application provides a fully enabling description of "automatically grouping" items for common reimbursement in Figure 2 and in the accompanying description.

Column 3 lines 31-52 and column 8 lines 57-63 merely discuss aspects of the manually driven Pritchard system and nowhere suggest the claimed features. Further, Pritchard fails to show or suggest suggests "automatically grouping an item identifying said provided service together with an item identifying another service provided to said specific entity based on predetermined service record allocation rules". There is also no recognition of the advantages gained by such automation or of the problem such burdensome error-prone manual operation involves. It is precisely the slow, burdensome, error prone nature of existing manual reimbursement systems that the claimed arrangement addresses by its automatic capabilities including its capability of "automatically grouping" items identifying provided services together for common reimbursement according to a reimbursement contract.

The Pritchard system also fails to show or suggest "automatically creating a reimbursement record identifying grouped items". The Pritchard system further fails to show or suggest "calculating a reimbursement amount" for the "automatically" grouped "identified provided service and said other service provided to said specific entity based on a reimbursement contract". Column 10 lines 35-45 merely discusses a funds transfer to reimburse a service fee manually entered via "input devices 60-66" (column 7 lines 46-48). The Pritchard system fails to show or suggest "calculating a reimbursement amount" for the "automatically" grouped "identified provided service and said other service provided to said specific entity based on a reimbursement contract". Consequently, withdrawal of the rejection of amended claim 1 under 35 USC 102(b) is respectfully requested.

Dependent claim 2 is considered to be patentable based on its dependence on claim 1. Claim 2 is also considered to be patentable because Pritchard

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does not show (or suggest) a system in which the "step of automatically creating a reimbursement record comprises creating a reimbursement record without manual intervention from received records identifying different types of services provided to said specific entity on separate occasions. As previously explained column 3 lines 31-52 relied on in the Rejection merely discuss aspects of the manually driven Pritchard system and nowhere suggest "automatically creating a reimbursement record" comprising "creating a reimbursement record without manual intervention from received records identifying different types of services provided to said specific entity on separate occasions".

Dependent claim 3 is considered to be patentable based on its dependence on claims 1 and 2. Claim 3 is also considered to be patentable because Pritchard does not show (or suggest) a system in which the "different types of services comprise an outpatient service and an inpatient service". There is no suggestion in Pritchard of "automatically grouping" items identifying "different types of services" comprising an "outpatient service and an inpatient service". Pritchard does not even recognize the difference in nature of inpatient and outpatient services or that this difference has an impact on grouping of services for reimbursement. Pritchard does not address automatic grouping of services for reimbursement at all. Column 3 lines 31-34 and column 4 lines 34-42 do not mention inpatient and outpatient services or recognize the difference in nature of inpatient and outpatient services or that this difference has an impact on grouping of services for reimbursement.

Dependent claim 4 is considered to be patentable based on its dependence on claim 1. Claim 4 is also considered to be patentable because Pritchard does not show (or suggest) a system involving the claim 4 combination of features in which "said predetermined service record allocation rules" for "automatically grouping an item identifying said provided service together with an item identifying another service provided to said specific entity" comprise "at least one of, (a) rules determining whether said provided service as well as said other service qualify for reimbursement under at least one reimbursement contract, and (b) rules in a reimbursement contract". No such automatic grouping rules are mention in column 3 or elsewhere in Pritchard.

Dependent claim 5 is considered to be patentable based on its dependence on claim 1.

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Dependent claim 6 is considered to be patentable based on its dependence on claim 1.

Amended independent claim 7 recites a "user interface supporting a method for determining payment for provision of multiple different services based on predetermined reimbursement rules" comprising "generating a first user selectable menu icon for initiating display of a reimbursement record, said reimbursement record showing data indicating automatically grouped items including an item identifying a service provided to a specific entity together with an item identifying an other service provided to said specific entity based on predetermined service record allocation rules; and automatically calculating reimbursement amounts for said identified provided service and said other service provided to said specific entity based on a reimbursement contract". Claim 7 is considered to be patentable for reasons given in connection with claim 1 and for additional reasons.

As previously explained in connection with claim 1, Pritchard fails to show or suggest "generating a first user selectable menu icon for initiating display of a reimbursement record...showing data indicating automatically grouped items including an item identifying a service provided to a specific entity together with an item identifying another service provided to said specific entity based on predetermined service record allocation rules". Pritchard further fails to suggest this feature in combination with "automatically calculating reimbursement amounts for" the "automatically grouped items" including "said identified provided service and said other service provided to said specific entity based on a reimbursement contract". Column 8 describes the manually driven system of Pritchard and nowhere shows or suggests the combination of features claimed.

Dependent claim 8 is considered to be patentable based on its dependence on claim 7 and for reasons given in connection with claim 1. Claim 8 is also considered to be patentable because Pritchard does not show (or suggest) the feature combination including "generating a second user selectable menu icon for initiating display of a bill including said reimbursement amount for' the "automatically grouped items" comprising "said provided service and said other service". Contrary to the Rejection statement on page 5 of the Rejection, Pritchard in column 8 or elsewhere does not mention such features or suggest the feature combination of claim 8.

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Amended independent claim 9 recites a "method for use in billing for provision of multiple different services based on predetermined reimbursement rules" comprising "receiving a record identifying a service provided to an entity; automatically applying predetermined allocation rules for identifying a reimbursement record indicating a group of services to be billed together on a single bill, said group of services having been provided to said entity; automatically creating a reimbursement record identifying grouped items; updating said identified reimbursement record to incorporate a record item representing said identified provided service; calculating a reimbursement amount for said identified provided service based on predetermined reimbursement rules; and preparing a bill including said group of services and said identified provided service for communication to a payer". Claim 9 is considered to be patentable for reasons given in connection with claims 1 and 7 and for additional reasons.

As previously explained in connection with claim 1, Pritchard fails to show or suggest "automatically applying predetermined allocation rules for identifying a reimbursement record indicating a group of services to be billed together on a single bill, said group of services having been provided to said entity; automatically creating a reimbursement record identifying grouped items". Pritchard in columns 6 and 8 relied on, or elsewhere, fails to show or suggest such automatic processing features.

Dependent claim 10 is considered to be patentable based on its dependence on claim 9. Claim 10 is also considered to be patentable because Pritchard does not show (or suggest) a system in which "said predetermined allocation rules comprise rules for determining said identified provided service as well as said group of services qualify for reimbursement under at least one of (a) a single reimbursement contract and (b) a common set of reimbursement contracts". Pritchard nowhere suggests "automatically applying ...predetermined service record allocation rules" for "identifying a reimbursement record indicating a group of services to be billed together on a single bill" that comprise "rules for determining said identified provided service as well as said group of services qualify for reimbursement under at least one of (a) a single reimbursement contract and (b) a common set of reimbursement contracts". No such automatic service grouping rules are mentioned in columns 9 and 10 or elsewhere in Pritchard.

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Prichard does not show (or suggest) the feature combination of claim 15 in which according to rules in a single reimbursement contract and including the step of sutomatically determining whether said identified service is also reimbursable according to rules in said single reimbursement contract". Contrary to the Rejection statement, Phichard in column 3 nowhere suggests "notomatically determining is dependence on claim 9. Claim 15 is also considered to be patentable because whether said identified service is also reimborsable according to rules in said single Amended dependent claim 15 is considered to be parentable based on "said reimbursement record indicates said group of services are reimbursable reimbursement contrace".

other services also provided to said specific entity?. Contrary to the Rejection. stetement, Pritchard in column 3 nowhere suggests "searching for other services also adividual person and (d) a group of people and including the step of searching for provided to said specific entity". Pritchard determines reimbursement for services based on information manually entered via devices 60-66 (column 7 lines 46-51) and nowikere contemplates, or provides any 35 USC 112 compliant enabling description Dependent claim 16 is considered to be patentable based on its dependence on claim 9. Claim 16 is also considered to be patentable because Princhard does not show (or suggest) the feature combination of claim 16 in which said specific eatily comprises at least one of, (a) a patient, (b) a company, (c) an of "searching for other services also provided to said specific eatity" in colonn 3 or elsewhere. Princhard does not meration soch a scerch at all.

relmbursement rules" comprising "receiving a record identifying a service provided to specific entity; automatically determining whether said identified service as well as said additional service provided to said specific entity qualify for reimbursement under a single reimbursement contract; automatically orealing a record indicating said identified service and additional service provided to said specific entity quality for reinbursement under a single reimbursement contract; and calculating a combursement amount for said identified service and additional service provided to said specific entity based on said single reimbursement contract". Claim 17 is considered to be patentable for reasons given in connection with claims 1, 7, 9 and 16 Amended independent claim 17 secites a 'tuchod for determining payment for provision of multiple different services based on predetermined a specific entity, searching for a record of an additional service provided to said and for additional reasons.

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As previously explained in connection with claim 1, Pritchard fails to show or suggest "searching for a record of an additional service provided to said specific entity; automatically determining whether said identified service as well as said additional service provided to said specific entity qualify for reimbursement under a single reimbursement contract; automatically creating a record indicating said identified service and additional service provided to said specific entity qualify for reimbursement under a single reimbursement contract". Pritchard in columns 3, 6 and 8 relied on or elsewhere fails to show or suggest such features.

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Dependent claim 18 is considered to be patentable based on its dependence on claim 17. Claim 18 is also considered to be patentable because Pritchard does not show (or suggest) the feature combination of claim 18 involving "preparing a bill including said reimbursement amount for said identified service and additional service for communication to a payer".

Dependent claim 19 is considered to be patentable based on its dependence on claim 17.

Dependent claim 20 is considered to be patentable based on its dependence on claim 17. Claim 20 is also considered to be patentable because Pritchard does not show (or suggest) the feature combination of claim 20 involving "identifying and prioritizing at least one of, (a) reimbursement contracts and (b) policies associated with reimbursement contracts, applicable for reimbursing for said identified service and additional service and selecting said single reimbursement contract from one of, (i) said prioritized reimbursement contracts and (ii) said reimbursement contracts associated with said prioritized policies". Pritchard does not show or suggest "identifying and prioritizing at least one of, (a) reimbursement contracts and (b) policies associated with reimbursement contracts, applicable for reimbursing for said identified service and additional service and selecting said single reimbursement contract from one of, (i) said prioritized reimbursement contracts and (ii) said reimbursement contracts associated with said prioritized policies" in column 3 or elsewhere. Pritchard does not show or suggest "identifying and prioritizing" reimbursement contracts and policies and selecting from prioritized policies and contracts in combination with the features of claim 17.

Dependent claim 21 is considered to be patentable based on its dependence on claim 17 for reasons given in connection with claim 17 and other claims.

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Dependent claim 22 is considered to be patentable based on its dependence on claim 17 for reasons given in connection with claim 17 and other claims. Claim 22 is also considered to be patentable because Pritchard does not show or suggest "sorting said identified service and additional service by date service is performed". Pritchard column 5 lines 25-32 relied on merely mentions patient birth date and date of last update of the MEDICARD and has no bearing on "sorting said identified service and additional service by date service is performed".

Amended independent claims 23 is considered to be patentable for reasons given in connection with claims 1, 7, 9 and 17 and other claims.

Dependent claim 24 is considered to be patentable based on its dependence on claim 23. Claim 24 is also considered to be patentable because Pritchard does not show (or suggest) the feature combination of claim 24 involving "preparing a bill including said reimbursement amount for said identified service and one other service for communication to a payer".

Dependent claim 25 is considered to be patentable based on its dependence on claim 23. Claim 25 is also considered to be patentable because Pritchard does not show (or suggest) the feature combination of claim 25 in which "said reimbursement record indicates services provided to said entity within a specific period and wherein said updating step comprises updating said reimbursement record to incorporate said record item representing said identified provided service in response to determination said identified provided service was provided within said specific period". Columns 5 and 8 of Pritchard, contrary to the Rejection statements, nowhere show or suggest such features. The Pritchard sections relied on nowhere mention or suggest update of an automatically generated reimbursement record to reflect services provided "within a specific period".

Amended dependent claim 26 is considered to be patentable based on its dependence on claim 23. Claim 26 is also considered to be patentable because Pritchard does not show (or suggest) the feature combination of claim 26 involving "automatically grouping said service provided to said specific entity with said at least one other service provided to said specific entity based on two or more of, (a) date of service, (b) patient identifier, (c) type of service, (d) type of patient and (e) patient medical characteristics". As previously explained automatic service grouping is nowhere shown or suggested in Pritchard.

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Dependent claims 27 is considered to be patentable for reasons given in connection with claim 20 and other claims.

In view of the above amendments and remarks, Applicants submit that the Application is in condition for allowance, and favorable reconsideration is requested.

Respectfully submitted,

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Alexander J. Burke

Reg. No. 40,425

Siemens Corporation, Customer No. 28524 Iselin, N.J. 08830 Tel. 732 321 3023 Fax 732 321 3030

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